

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2003

Application or Docket Number

09/68 3249

**CLAIMS AS FILED - PART I**

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	33 minus 20 =	*
INDEPENDENT CLAIMS	11 minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

**AMENDMENT A**

	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	33	Minus 33	= 0
Independent	10	Minus 11	= 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

**AMENDMENT B**

	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus 33	=
Independent	*	Minus 11	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

**AMENDMENT C**

	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	33	Minus 33	=
Independent	11	Minus 11	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	385.00
XS 9=	
X43=	
+145=	
TOTAL	

RATE	FEE
BASIC FEE	770.00
XS18=	
X86=	
+290=	
TOTAL	

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
XS18=	
X86=	
+290=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
XS18=	
X86=	
+290=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
XS18=	
X86=	
+290=	
TOTAL ADDIT. FEE	

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SEP 20 2004

PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Michael Austin and Barry O'Brien  
Application No.: 09/683249  
Filed: December 5, 2001  
For: Combined Balloon-Expanding and Self-Expanding Stent  
Examiner: Michael Thaler  
Group Art Unit: 3731

Mail Stop Petition  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Docket No.: 963.2B-10014-US01

## FACSIMILE TRANSMITTAL LETTER

TO: Examiner Thaler  
FACSIMILE NO.: 703-872-9306  
GROUP ART UNIT: 3731  
TOTAL NUMBER OF PAGES (including cover letter): 14

DATE: September 20, 2004  
TIME: 11:30 am.

Following please find a 2 page Amendment, Petition and Fee to Correct and/or Add to Originally Named (Inventor(s) (37 C.F.R. 1.48(a) and/or (c)); 1 page Petition to Correct Inventorship Pursuant to 37 C.F.R. 1.48(a); 3 page Declaration; 2 page Assignee's Statement of Ownership 37 CFR 3.73(B); 3 page copy of Recorded Assignment from Michael Austin to SciMed Life Systems, Inc., 2 page copy of Assignment from Barry O'Brien to SciMed Life Systems, Inc. incl. Recordation Form Cover Sheet in addition to this 1 page Facsimile Transmittal Letter.

If a fee is required, Commissioner of Patents is hereby authorized to charge Deposit Account No. 22-0350 for any required fees. To the extent that any petition is required to consider this communication, please treat this as such a petition.

Respectfully Submitted,

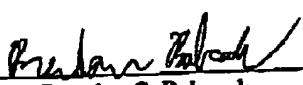
VIDAS, ARRETT &amp; STEINKRAUS, P.A.

09/27/2004 09:00:00 00000004 220350 09/20/2004

01 15:1430 100.00 18

Date: September 20, 2004

By:

  
Brendan C. Babcock  
Reg. No. 50,705

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## Certificate of Transmission

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, Fax No. 703-872-9306, on September 20, 2004.

Signature:

  
Rebecca M. Painschab